Health Care Financing

RESEARCH BRIEF

These brief reports from the Office of Research, Office of Research and Demonstrations, provide program information on current health care issues.

They are based on data from the Medicare statistical files developed and maintained by the Bureau of Data Management and Strategy, Health Care Financing Administration.

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Medicare: Use and Charges for Inpatient Services in Short-Stay Hospitals, by Diagnosis-Related Groups, Calendar Years 1981 and 1984

Medicare: Use and Charges for Inpatient Services in Short-Stay Hospitals, by Diagnosis-Related Groups, Calendar Years 1981 and 1984

This report presents 1981 and 1984 Medicare hospital insurance (HI) program data on the use and charges for short-stay hospital inpatient services, by diagnosis-related groups (DRG's). The report, therefore, provides a basis for measuring and analyzing the impact of the new Medicare prospective payment system (PPS), which went into effect October 1, 1983. The program data shown in this report should not be construed, in any context, as providing estimates of payments being made under PPS. The 1984 program data shown in this report reflects both PPS and non-PPS patient bills.

PPS radically restructured the payment system in which participating short-stay hospitals are reimbursed for inpatient services rendered to Medicare beneficiaries. PPS pays hospitals a predetermined, fixed rate for each discharge, according to the DRG assigned to each patient. This payment to the hospital for a given case excludes statutory deductible and coinsurance amounts. The new payment system gives hospitals the incentive to hold costs down since they earn a profit when their costs fall below the prospective payment, or absorb a loss when their costs exceed the prospective payment.

The DRG patient classification system provides the foundation for paying participating short-stay hospitals under the Medicare PPS. The DRG system is designed to classify patients, on the basis of diagnosis and other selected characteristics, into clinically coherent and homogeneous groups that are similar in resource consumption. That is, patients classified in the same DRG should have similar medical conditions, receive similar hospital care, and use an approximately equal amount of resources. Although there is some variation in the resources used among patients within a DRG, there should be an overall balance across patients in the same DRG. The DRG system, therefore, should provide for equitable payments, in that comparable services should be equitably reimbursed.

The data shown in this report are classified according to the 66 leading (most frequent number of discharges in 1984) DRG's. Use and charges for short-stay hospital inpatient services in 1981 and 1984 are measured by number of discharges, average length of stay, and average charge per discharge (Table 1); the percentage distribution of charges incurred by type of service (Table 2); and selected length of stay percentiles (Table 3). Thus, the report provides a relative assessment of use and charges for inpatient services among the leading DRG's.

The most important limitation of the data shown in this report, as related to the impact of PPS, is that changes in use by DRG may reflect to some extent, increased accuracy in the reporting of the medical codes, changes in the information contained in the billing system, and changes in incentives to report, rather than real changes in the diagnoses or procedures (which determine the DRG). For example, DRG definitions for the 1981 data are slightly different (due to data limitations) from the DRG definitions used to classify the 1984 data. As a result, extreme caution should be exercised in analyzing the program data shown in this report.

This report was prepared in the Division of Program Studies of the Office of Research. For additional information regarding this report, or for suggestions regarding future topics, call Charles Helbing at (301) 597-1420 or FTS 987-1420.

Selected Data Highlights

Table 1 - Use and Charges, 1981 and 1984

- The average length of stay (ALOS) per discharge dropped from 10.3 days in 1981 to 8.8 days in 1984, a difference of 15 percent.

- The average charge per discharge increased from $3,555 in 1981 to $4,803 in 1984, an average annual rate of increase of 10.5 percent.

- In 1984, the 66 leading DRG's (out of the total 470 DRG's) accounted for about 69 percent of all discharges and 67 percent of all Medicare short-stay hospital charges during 1984. In 1981, the same DRG's accounted for 62 percent of all discharges and 62 percent of all charges.

- The two most common DRG's in 1981 and 1984 were heart failure and shock (DRG #127) and esophagitis, gastroenteritis, and miscellaneous digestive disorders with age greater than 69 and/or with a comorbidity or complication (DRG #182). In 1984, these DRG's accounted for 3.8 percent and 3.7 percent, respectively, of all Medicare discharges.

- For some of the leading DRG's, there was a substantial change in the number of discharges reported in 1981 and 1984. For example, for chemotherapy (DRG #410), the number of discharges increased by 873 percent from 1981 (8,360) to 1984 (81,385). This large difference probably reflects, for the most part, an expanded and improved medical reporting system and more adherence to the medical coding guidelines.

- All of the 66 leading DRG's showed a decrease in the ALOS per discharge between 1981 and 1984, ranging from 3 percent for psychoses (DRG #430) to 55 percent for circulatory disorders excluding acute myocardial infarction, with cardiovascular catheter and without complex diagnosis (DRG #125).

Table 2 - Distribution of Charges, 1981 and 1984

- In 1984, routine room and board accommodations accounted for 34 percent of the total inpatient charges for Medicare discharges from participating short-stay hospitals. Intensive/coronary care accommodations accounted for another 7 percent of total charges and ancillary services accounted for 58 percent of total charges. In 1981, the comparable figures were 40 percent, 7 percent, and 53 percent, respectively (Figure 1).

- The large decrease in the proportion of routine room and board services from 1981 (40 percent) to 1984 (34 percent) reflects the substantial drop (15 percent) in the ALOS per discharge during this period.

- In 1984, among the individual ancillary services, charges for pharmacy and laboratory services accounted for the highest proportion of total inpatient charges, 11.7 percent and 11.5 percent, respectively. In 1981, the comparable figures were 10.1 percent and 11.6 percent, respectively.

- Among the 66 leading DRG's during 1984, the proportion of ancillary charges to total charges ranged from a low of 21 percent for psychoses (DRG #430) to a high of 80 percent for lens procedures (DRG #39).

Table 3 - Length of Stay, 1981 and 1984

- In 1984, the ALOS for all Medicare discharges was 8.8 days. The median length of stay was 6.2 days, or 42 percent less than the ALOS. In 1981, the median length of stay was 7.2 days, or 43 percent less than the ALOS (10.3 days).

- Among the 66 leading DRG's in 1984, the coefficient of variation (the ratio of the standard deviation to the average length of stay) ranged from 0.59 for deep vein thrombophlebitis (DRG #128) to 1.88 for organic disturbances and mental retardation (DRG# 429).

- The decrease in length of stay between 1981 and 1984 appears to be distributed uniformly. That is, the drop in length of stay was between 10 and 16 percent for each of the selected length- of- stay percentiles.

TABLE 1

MEDICARE: NUMBER OF DISCHARGES, RANK ORDER NUMBER, AVERAGE LENGTH OF STAY PER DISCHARGE, AND AVERAGE CHARGE PER DISCHARGE FOR BENEFICIARIES DISCHARGED FROM PARTICIPATING SHORT-STAY HOSPITALS BY DIAGNOSIS RELATED GROUPS (DRG'S), CALENDAR YEARS 1981 AND 1984

DRG NUMBER	CALENDAR YEAR 1981				CALENDAR YEAR 1984				PERCENT CHANGE 1981-1984		
	NUMBER OF DISCHARGES	RANK ORDER NUMBER	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE	NUMBER OF DISCHARGES	RANK ORDER NUMBER	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE	NUMBER OF DISCHARGES	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE
TOTAL, ALL DRG'S	10,161,245	---	10.3	$3,555	10,609,385	--	8.8	$4,803	4.4	- 14.6	35.1
LEADING DRG'S	6,800,875	---	10.3	3,558	7,338,910	--	8.7	4,641	16.5	- 15.5	30.4
005	25,555	84	12.3	5,077	55,580	42	9.4	7,029	117.9	- 23.6	19.6
012	55,490	40	14.1	5,773	54,760	44	12.9	5,163	- 1.3	- 8.5	36.8
014	259,345	6	15.4	4,487	309,875	5	12.4	5,556	19.5	- 19.5	23.8
015	131,530	15	7.7	2,255	171,955	11	6.0	2,594	30.7	- 22.1	15.0
024	28,365	77	8.1	2,486	53,875	48	6.9	3,397	89.9	- 14.8	36.6
039	331,700	4	3.2	1,687	360,565	3	2.2	2,366	8.7	- 31.3	40.2
065	35,355	64	5.8	1,492	42,500	57	4.7	1,804	20.2	- 19.0	20.9
079	14,390	138	16.2	6,380	49,880	54	12.7	8,264	246.6	- 21.6	29.5
082	122,930	18	11.7	3,909	117,375	20	9.7	4,822	- 4.5	- 17.1	23.4
087	50,870	45	11.6	5,530	91,665	26	9.9	7,595	82.0	- 14.7	37.3
088	262,500	5	10.1	3,674	207,270	8	8.6	4,685	- 21.0	- 14.9	27.5
089	231,880	7	11.3	3,777	307,720	6	9.4	4,827	32.7	- 16.8	27.8
096	131,070	16	8.6	2,663	174,430	10	7.2	3,494	33.1	- 16.3	31.2
099	24,560	88	7.9	2,832	42,445	58	6.3	3,414	72.8	- 20.3	20.6
107	30,310	72	16.3	15,890	36,835	66	14.4	21,717	21.5	- 11.7	36.7
110	23,345	99	18.4	10,697	54,375	46	16.2	14,864	132.9	- 12.0	39.0
116	42,670	58	11.5	9,330	52,505	50	9.2	11,947	23.0	- 20.0	28.0
121 1/	-----	---	----	-----	100,105	24	12.1	7,290	----	----	----
122	199,735	9	12.8	4,603	154,785	14	10.3	5,415	- 22.5	- 19.5	17.6
128	44,380	51	6.2	3,819	68,440	36	5.6	5,705	54.2	- 9.7	49.4
125	16,615	127	8.2	5,944	62,580	39	8.7	3,211	276.6	- 54.9	- 46.0

SEE FOOTNOTE AT END OF TABLE

TABLE 1 (CONTINUED)

MEDICARE: NUMBER OF DISCHARGES, RANK ORDER NUMBER, AVERAGE LENGTH OF STAY PER DISCHARGE, AND AVERAGE CHARGE PER DISCHARGE FOR BENEFICIARIES DISCHARGED FROM PARTICIPATING SHORT-STAY HOSPITALS BY DIAGNOSIS RELATED GROUPS (DRG'S), CALENDAR YEARS 1981 AND 1984

	CALENDAR YEAR 1981				CALENDAR YEAR 1984				PERCENT CHANGE 1981-1984		
DRG NUMBER	NUMBER OF DISCHARGES	RANK ORDER NUMBER	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE	NUMBER OF DISCHARGES	RANK ORDER NUMBER	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE	NUMBER OF DISCHARGES	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE
127	383,140	1	10.7	3,510	503,640	1	8.7	4,243	31.5	- 18.7	20.9
128	29,445	74	11.4	2,798	41,465	61	9.8	3,474	40.8	- 14.0	24.2
130	107,845	20	10.6	3,208	89,475	28	8.1	3,487	- 17.0	- 23.6	8.7
132	352,210	3	9.2	2,927	98,980	25	7.1	3,308	- 71.9	- 22.8	13.0
134	135,825	14	8.2	2,318	68,745	35	6.7	2,676	- 49.4	- 18.3	15.4
138	146,140	13	7.8	3,110	207,360	7	6.3	3,365	41.9	- 19.2	8.2
140	183,555	11	7.1	2,491	321,750	4	5.6	2,817	75.3	- 21.1	13.1
141	47,455	47	6.8	2,110	84,740	29	5.8	2,650	78.6	- 14.7	25.6
143	64,725	31	5.9	2,113	73,790	32	4.4	2,429	14.0	- 25.4	15.0
144	20,165	114	9.8	3,948	39,435	63	8.3	4,702	95.6	- 15.3	19.1
148	57,345	38	20.2	9,055	102,910	23	17.6	12,510	79.5	- 12.9	38.2
154	21,855	106	10.8	9,327	52,540	49	15.4	12,063	140.4	- 18.1	29.3
157	23,720	96	8.2	2,789	39,090	64	6.4	3,135	64.8	- 22.0	12.4
161	60,650	34	6.9	2,358	84,135	30	5.3	2,846	38.7	- 23.2	20.7
172	73,680	28	13.0	4,094	51,950	52	10.1	4,481	- 29.5	- 22.3	9.5
174	95,670	23	9.0	3,214	140,825	17	7.5	3,847	47.2	- 16.7	19.7
180	44,280	52	9.1	2,835	64,445	37	7.5	3,259	45.5	- 17.6	15.0
182	369,815	2	7.3	2,003	364,675	2	6.1	2,512	- 1.4	- 16.4	25.4
183	99,070	22	6.4	1,858	70,900	34	5.0	2,103	- 28.4	- 21.9	13.2
188	62,645	33	7.8	2,619	52,430	51	6.3	3,065	- 16.3	- 19.2	17.0
197	72,365	29	14.0	5,433	71,315	33	11.7	7,038	- 1.5	- 16.4	29.5
207	58,355	36	9.0	2,806	55,570	43	6.9	3,199	- 4.8	- 23.3	14.0
209	77,880	26	19.3	7,737	146,135	16	15.6	10,153	87.6	- 19.2	31.2

SEE FOOTNOTE AT END OF TABLE

TABLE 1 (CONTINUED)

MEDICARE: NUMBER OF DISCHARGES, RANK ORDER NUMBER, AVERAGE LENGTH OF STAY PER DISCHARGE, AND AVERAGE CHARGE PER DISCHARGE FOR BENEFICIARIES DISCHARGED FROM PARTICIPATING SHORT-STAY HOSPITALS BY DIAGNOSIS RELATED GROUPS (DRG'S), CALENDAR YEARS 1981 AND 1984

	CALENDAR YEAR 1981			CALENDAR YEAR 1984			PERCENT CHANGE 1981-1984		
DRG NUMBER	NUMBER OF DISCHARGES	RANK ORDER NUMBER	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE	NUMBER OF DISCHARGES	RANK ORDER NUMBER	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE	NUMBER OF DISCHARGES	AVERAGE LENGTH OF STAY	AVERAGE CHARGE PER DISCHARGE
210	62,665	32	21.2	5,990	116,970	21	16.7	8,538	86.7	- 21.2	22.1
236	53,425	42	17.0	4,162	45,945	55	12.6	4,609	- 14.0	- 25.9	8.3
239	19,835	117	13.4	3,738	60,325	40	10.4	3,963	204.1	- 22.4	6.0
243	181,540	12	9.8	2,402	195,680	9	8.0	2,844	7.7	- 18.4	18.4
244	58,385	35	10.1	2,432	39,940	62	7.9	2,776	- 31.6	- 21.8	14.1
253	43,960	53	9.9	2,431	41,980	59	7.6	2,725	- 4.5	- 23.2	12.1
277	41,310	60	11.0	3,017	56,700	41	9.1	3,715	37.3	- 17.3	23.1
294	196,420	10	10.1	2,661	137,805	18	8.4	3,255	- 29.8	- 16.8	22.3
296	102,735	21	10.5	3,080	171,540	12	8.3	3,522	67.0	- 21.0	14.4
310	30,810	69	6.9	2,547	54,425	45	5.6	3,154	76.6	- 18.8	23.8
316	58,330	37	11.0	4,759	44,495	56	9.7	5,558	- 23.7	- 11.8	16.8
320	110,835	19	9.4	2,687	134,555	19	8.1	3,557	21.4	- 13.8	32.4
331	42,715	57	9.3	2,955	37,005	65	7.3	3,425	- 13.4	- 21.5	15.5
336	91,075	25	9.8	3,384	150,290	15	7.9	4,142	65.0	- 19.4	22.4
395	93,710	24	8.8	2,658	90,845	27	6.7	2,991	- 3.1	- 23.9	12.5
403	55,215	41	11.8	4,187	53,965	47	11.0	6,143	- 2.3	- 6.8	46.7
410	8,360	199	4.2	1,498	81,385	31	3.3	2,042	873.5	- 21.4	36.3
416	23,765	94	14.2	5,685	64,125	38	11.3	6,754	169.8	- 20.4	18.8
429	56,855	39	13.7	3,140	51,105	53	11.6	3,713	- 10.1	- 15.3	18.2
430	70,135	30	16.5	3,680	112,730	22	16.0	4,990	60.7	- 3.0	35.6
449	27,355	79	8.0	2,437	41,980	60	6.3	2,939	53.5	- 21.3	20.6
468	221,410	8	17.0	7,325	159,190	13	16.6	10,415	- 28.1	- 2.4	42.2
ALL OTHER DRG'S	3,860,870	---	10.2	3,849	3,270,475	--	9.1	5,165	- 15.3	- 10.8	48.5

1/ IN 1981 DRG 121 WAS COMBINED WITH DRG 122.

TABLE 2

MEDICARE: PERCENTAGE DISTRIBUTION OF CHARGES INCURRED FOR BENEFICIARIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS RELATED GROUPS (DRG'S) AND TYPE OF SERVICE, CALENDAR YEARS 1981 AND 1984

CALENDAR YEAR 1981

DRG NUMBER	ALL SERVICES 1/	ACCOMMODATION SERVICES		ANCILLARY SERVICES								
		ROUTINE CARE	INTENSIVE/ CORONARY CARE	TOTAL	OPERATING ROOM	PHARMACY	LABORATORY	RADIOLOGY	SUPPLIES	ANESTHESIA	INHALATION THERAPY	OTHER
TOTAL, ALL DRG'S	100.0	39.8	7.0	52.7	5.8	10.1	11.6	5.0	6.4	1.0	5.0	8.4
LEADING DRG'S	100.0	39.5	7.8	52.0	4.8	9.8	11.8	4.9	6.4	0.8	5.5	8.6
005	100.0	28.5	11.3	60.1	15.2	7.9	8.8	8.7	6.8	2.6	3.4	6.8
012	100.0	55.9	3.4	39.2	0.5	6.7	8.3	4.6	4.0	0.1	3.3	13.1
014	100.0	47.7	6.1	45.1	0.4	9.0	9.2	4.5	5.3	0.1	4.9	12.8
015	100.0	47.8	4.2	47.2	1.6	5.7	11.0	10.9	3.5	0.3	2.3	12.7
024	100.0	46.5	6.3	46.2	0.3	7.4	12.5	6.9	4.1	0.1	3.5	12.2
039	100.0	29.7	0.3	70.0	31.1	8.8	5.6	1.8	14.5	4.3	0.6	3.3
065	100.0	52.0	3.2	44.6	0.5	5.0	12.2	10.4	2.6	0.1	1.3	12.7
079	100.0	36.6	7.3	55.6	0.9	15.0	12.9	4.0	6.1	0.2	11.4	5.6
082	100.0	43.8	3.8	52.1	2.8	11.6	10.9	7.3	4.5	0.6	8.2	6.5
087	100.0	23.8	18.0	57.5	0.4	11.7	14.0	3.6	6.0	0.1	14.4	8.0
088	100.0	35.4	7.3	56.6	0.4	11.8	10.9	3.4	4.2	0.1	19.7	6.7
089	100.0	40.0	5.0	52.3	0.4	14.8	11.9	4.1	5.4	0.1	12.2	6.2
096	100.0	42.5	4.0	52.9	0.3	12.2	10.8	3.5	3.7	0.1	16.5	6.4
099	100.0	35.9	8.3	55.6	1.6	9.4	14.0	5.9	5.0	0.3	11.9	7.7
107	100.0	13.4	14.0	72.3	16.9	9.1	13.3	3.4	11.1	2.0	6.5	10.3
110	100.0	23.4	11.9	64.3	13.3	11.2	11.8	4.6	8.6	2.3	5.6	7.3
116	100.0	14.3	11.8	73.8	18.5	4.1	5.5	3.5	28.9	0.8	1.9	10.7
121 2/	-----	----	----	----	----	----	----	----	----	----	----	----
122	100.0	29.0	27.8	43.1	0.4	7.0	13.0	3.4	4.3	0.0	5.6	9.5
123	100.0	13.7	25.3	60.5	0.5	12.6	15.9	4.2	8.6	0.2	9.8	8.9
125	100.0	18.8	12.2	68.7	15.8	7.2	11.7	6.7	8.5	1.2	4.5	13.5

SEE FOOTNOTES AT END OF TABLE

TABLE 2 (CONTINUED)

MEDICARE: PERCENTAGE DISTRIBUTION OF CHARGES INCURRED FOR BENEFICIARIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS RELATED GROUPS (DRG'S) AND TYPE OF SERVICE, CALENDAR YEARS 1981 AND 1984

CALENDAR YEAR 1981

DRG NUMBER	ALL SERVICES 1/	ACCOMMODATION SERVICES		ANCILLARY SERVICES								
		ROUTINE CARE	INTENSIVE/ CORONARY CARE	TOTAL	OPERATING ROOM	PHARMACY	LABORATORY	RADIOLOGY	SUPPLIES	ANESTHESIA	INHALATION THERAPY	OTHER
127	100.0	40.1	11.0	48.3	0.3	8.7	14.2	4.4	4.5	0.1	8.7	8.0
128	100.0	57.8	1.4	40.3	0.3	10.4	13.2	5.1	4.7	0.0	1.5	5.7
130	100.0	45.2	5.6	48.6	3.2	9.5	11.5	7.4	5.8	0.7	3.5	7.7
132	100.0	38.3	13.3	47.9	1.0	7.6	13.1	5.2	4.9	0.2	5.8	10.5
134	100.0	47.0	7.3	45.3	0.8	7.3	13.5	6.8	3.8	0.2	3.8	9.7
138	100.0	31.1	16.7	51.9	1.7	6.5	13.1	4.7	8.5	0.2	4.9	12.7
140	100.0	34.7	19.7	45.5	0.5	5.8	14.7	5.0	3.5	0.1	4.5	11.7
141	100.0	44.0	9.3	46.4	0.5	4.5	13.4	7.3	3.9	0.1	2.3	14.9
143	100.0	30.6	18.6	50.7	0.4	6.5	15.6	6.8	4.2	0.1	4.7	12.6
144	100.0	32.7	13.7	53.0	1.0	9.3	14.3	5.1	5.1	0.1	7.9	10.8
148	100.0	31.3	8.1	60.2	9.2	16.4	11.8	3.5	7.8	1.9	4.6	5.5
154	100.0	27.1	10.6	62.0	8.0	16.2	13.4	3.7	7.5	1.6	5.8	6.2
157	100.0	43.4	2.5	54.0	13.6	9.7	10.6	3.9	6.4	2.9	2.1	4.9
161	100.0	43.0	1.9	54.8	19.4	6.8	8.3	3.3	6.1	4.4	2.6	4.2
172	100.0	46.6	3.4	49.3	3.7	13.7	10.9	5.5	6.0	0.8	3.2	6.2
174	100.0	38.9	7.7	52.3	1.6	10.3	17.0	5.9	5.3	0.2	3.2	9.8
180	100.0	44.7	4.0	50.6	1.7	13.7	12.2	7.6	6.4	0.4	3.3	6.1
182	100.0	48.5	2.9	48.3	1.7	10.3	13.2	9.6	4.2	0.3	2.3	7.1
183	100.0	44.8	2.9	52.0	2.2	11.6	13.7	10.6	4.2	0.4	2.2	7.4
188	100.0	41.5	4.8	53.2	5.5	11.5	12.6	6.4	5.8	1.2	3.3	7.4
197	100.0	35.1	5.4	59.2	10.7	14.0	11.1	4.9	7.0	2.6	4.5	4.6
207	100.0	42.0	4.3	53.3	2.5	13.0	13.6	9.5	4.8	0.6	3.0	6.7
209	100.0	38.0	1.6	60.0	16.4	7.9	7.0	2.4	13.7	1.9	2.2	8.7

SEE FOOTNOTES AT END OF TABLE

TABLE 2 (CONTINUED)

MEDICARE: PERCENTAGE DISTRIBUTION OF CHARGES INCURRED FOR BENEFICIARIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS RELATED GROUPS (DRG'S) AND TYPE OF SERVICE, CALENDAR YEARS 1981 AND 1984

CALENDAR YEAR 1981

DRG NUMBER	ALL SERVICES 1/	ACCOMMODATION SERVICES		ANCILLARY SERVICES							
		ROUTINE CARE	INTENSIVE/ CORONARY CARE	TOTAL	OPERATING ROOM	PHARMACY	LABORATORY	RADIOLOGY	SUPPLIES	ANESTHESIA	INHALATION THERAPY	OTHER
210	100.0	44.7	2.6	52.0	10.3	8.1	8.1	4.0	8.8	1.8	8.0	8.7
236	100.0	54.1	2.6	41.8	3.8	7.5	7.6	4.4	6.7	0.9	2.9	9.6
239	100.0	54.8	1.6	42.6	1.5	9.8	9.3	8.0	3.8	0.3	2.6	8.3
243	100.0	57.9	1.2	40.2	0.9	6.2	7.7	8.4	3.8	0.2	1.5	12.2
244	100.0	56.0	1.4	41.5	1.9	6.3	9.5	7.4	4.4	0.3	1.5	11.3
253	100.0	58.6	1.7	38.5	2.8	5.8	7.4	6.3	4.7	0.7	2.0	10.0
277	100.0	53.7	1.2	44.3	1.2	16.0	10.1	3.3	6.2	0.3	1.3	6.7
294	100.0	53.0	3.6	42.7	0.7	8.4	15.7	5.0	3.7	0.2	2.4	7.4
296	100.0	49.0	3.5	46.6	0.5	10.6	14.2	4.9	5.6	0.1	3.7	7.8
310	100.0	42.6	1.6	55.7	15.3	8.2	11.2	4.8	6.5	3.1	1.8	4.9
316	100.0	32.2	8.0	59.1	1.9	10.8	16.1	3.9	5.8	0.4	4.2	16.6
320	100.0	47.5	2.1	49.6	2.2	14.4	13.2	5.3	5.9	0.5	2.6	6.4
331	100.0	44.0	3.5	52.0	5.2	9.4	13.5	6.8	5.6	1.2	2.6	8.2
336	100.0	43.0	1.6	55.1	14.4	8.9	11.6	4.1	7.7	2.8	1.6	4.8
395	100.0	47.6	2.2	48.5	0.9	7.6	18.1	6.6	3.9	0.1	2.5	10.5
403	100.0	43.2	2.7	53.5	1.4	14.1	16.6	5.3	4.5	0.3	3.2	8.8
410	100.0	48.2	0.6	50.8	0.8	24.4	10.9	4.9	3.9	0.1	0.8	5.6
416	100.0	36.2	6.4	56.1	0.5	18.9	14.7	3.8	6.3	0.1	5.2	7.9
429	100.0	62.3	2.4	31.9	0.4	6.1	8.7	4.4	3.6	0.1	1.9	10.3
430	100.0	76.5	1.9	20.8	0.3	4.2	5.8	2.5	1.2	0.2	0.7	6.8
449	100.0	43.0	10.5	45.9	0.4	7.5	15.2	5.0	4.4	0.1	5.1	8.8
468	100.0	33.0	7.6	58.8	9.3	11.9	11.6	4.2	7.8	1.8	4.8	8.1
ALL OTHER DRG'S	100.0	40.2	5.5	53.7	7.5	10.6	11.2	5.1	6.5	1.5	4.1	8.0

SEE FOOTNOTES AT END OF TABLE

TABLE 2 (CONTINUED)

MEDICARE: PERCENTAGE DISTRIBUTION OF CHARGES INCURRED FOR BENEFICIARIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS RELATED GROUPS (DRG'S) AND TYPE OF SERVICE, CALENDAR YEARS 1981 AND 1984

CALENDAR YEAR 1984

DRG NUMBER	ALL SERVICES 1/	ACCOMMODATION SERVICES		ANCILLARY SERVICES								
		ROUTINE CARE	INTENSIVE/ CORONARY CARE	TOTAL	OPERATING ROOM	PHARMACY	LABORATORY	RADIOLOGY	SUPPLIES	ANESTHESIA	INHALATION THERAPY	OTHER
TOTAL, ALL DRG'S	100.0	34.2	7.3	57.8	6.5	11.7	11.5	4.8	8.0	1.1	5.2	9.1
LEADING DRG'S	100.0	34.3	7.9	57.2	5.2	11.6	11.8	4.8	8.0	0.8	5.8	9.2
005	100.0	23.4	11.6	64.7	16.7	8.9	8.3	8.1	8.7	3.0	3.6	7.4
012	100.0	53.4	2.5	43.0	0.4	5.9	7.7	4.1	3.9	0.1	2.3	18.6
014	100.0	42.1	6.9	50.4	0.3	9.9	9.8	5.1	6.0	0.1	5.3	14.0
015	100.0	43.6	4.0	52.1	0.7	5.9	11.7	12.5	4.0	0.1	2.2	15.0
024	100.0	38.2	7.8	53.7	0.3	9.3	13.9	6.6	5.3	0.1	5.0	13.3
039	100.0	19.4	0.2	80.3	33.8	11.3	4.3	1.4	21.5	4.3	0.4	3.4
065	100.0	47.8	3.1	49.0	0.3	5.5	12.9	10.2	3.1	0.0	1.3	15.6
079	100.0	28.2	7.4	63.7	0.7	19.9	12.3	3.6	7.6	0.1	13.5	6.0
082	100.0	40.4	3.1	56.0	1.9	13.2	11.3	7.8	5.0	0.3	8.6	7.8
087	100.0	19.0	16.4	63.9	0.3	14.5	12.5	3.2	7.1	0.1	18.4	7.8
088	100.0	33.1	6.5	59.3	0.3	13.4	11.3	3.2	4.6	0.1	19.5	6.8
089	100.0	35.0	4.8	59.5	0.4	17.9	12.2	3.9	5.8	0.1	12.9	6.4
096	100.0	37.2	3.8	58.5	0.3	15.1	11.3	3.3	4.4	2/	17.4	6.7
099	100.0	32.8	7.7	58.8	1.1	10.8	13.5	5.5	4.8	0.2	13.2	9.7
107	100.0	11.4	13.5	74.1	17.2	9.3	12.7	3.1	12.9	2.2	5.3	10.5
110	100.0	18.9	11.8	68.6	13.4	12.8	11.1	4.5	10.9	2.3	6.0	7.5
116	100.0	11.5	10.1	78.0	15.3	3.9	4.9	3.7	35.9	0.7	1.6	11.9
121	100.0	21.9	26.7	51.1	0.2	9.6	13.5	3.8	5.9	2/	7.4	10.6
122	100.0	26.1	27.4	45.9	0.3	7.4	13.1	3.7	4.6	2/	5.1	11.8
123	100.0	9.4	24.4	65.7	0.3	14.2	15.6	4.3	10.1	0.1	10.9	10.1
125	100.0	21.6	8.4	69.8	4.8	4.8	9.8	10.8	6.4	0.1	1.8	31.2

SEE FOOTNOTES AT END OF TABLE

TABLE 2 (CONTINUED)

MEDICARE: PERCENTAGE DISTRIBUTION OF CHARGES INCURRED FOR BENEFICIARIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS RELATED GROUPS (DRG'S) AND TYPE OF SERVICE, CALENDAR YEARS 1981 AND 1984

CALENDAR YEAR 1984

DRG NUMBER	ALL SERVICES 1/	ACCOMMODATION SERVICES		TOTAL	ANCILLARY SERVICES							
		ROUTINE CARE	INTENSIVE/ CORONARY CARE		OPERATING ROOM	PHARMACY	LABORATORY	RADIOLOGY	SUPPLIES	ANESTHESIA	INHALATION THERAPY	OTHER
127	100.0	35.8	11.6	52.2	0.2	9.6	14.7	4.5	5.1	2/	9.3	9.8
128	100.0	53.6	1.4	44.7	0.2	12.0	14.0	5.2	6.0	2/	1.6	5.8
130	100.0	45.1	3.7	50.5	1.4	10.7	12.1	9.2	6.0	0.3	2.8	8.1
132	100.0	34.1	13.6	51.7	0.4	7.8	13.9	5.7	5.4	0.1	5.7	12.7
134	100.0	44.9	7.6	47.1	0.4	7.2	14.4	6.9	4.0	0.1	3.2	10.9
138	100.0	31.0	17.3	51.3	0.5	6.9	14.3	4.6	6.7	0.1	4.7	13.7
140	100.0	30.5	20.2	49.0	0.2	6.5	15.6	4.9	4.1	2/	4.8	12.9
141	100.0	41.0	9.0	49.7	0.3	5.1	14.0	7.3	4.3	2/	2.4	16.3
143	100.0	28.1	18.6	52.9	0.3	6.2	16.6	6.8	4.3	2/	4.4	14.4
144	100.0	29.8	14.0	55.7	0.5	10.3	14.4	4.9	5.6	0.1	9.0	10.8
148	100.0	25.5	8.0	65.8	9.7	19.1	11.1	3.3	9.6	2.0	5.0	6.0
154	100.0	21.9	10.7	66.8	7.6	18.2	12.7	3.6	9.0	1.5	6.5	7.6
157	100.0	39.2	2.3	58.0	18.2	10.7	11.4	4.4	7.2	2.7	1.8	6.6
161	100.0	36.6	1.9	61.1	22.7	7.6	7.9	2.9	7.9	4.8	2.8	4.7
172	100.0	46.7	2.2	51.3	2.6	14.6	11.5	6.2	6.0	0.4	2.8	7.2
174	100.0	35.5	7.5	56.1	1.6	11.9	17.3	5.5	5.9	0.1	3.4	10.5
180	100.0	44.0	2.6	52.8	0.8	15.3	12.5	9.1	6.7	0.1	2.7	6.6
182	100.0	44.2	2.8	52.6	1.5	12.4	14.1	8.8	4.8	0.2	2.4	8.5
183	100.0	43.4	2.5	53.5	2.0	11.7	13.5	11.4	4.0	0.3	1.5	9.2
188	100.0	39.4	3.7	56.3	3.3	13.8	13.5	5.7	6.4	0.5	2.8	9.4
197	100.0	29.8	5.8	64.1	11.3	16.1	10.8	4.6	8.3	2.6	4.7	5.7
207	100.0	38.3	3.7	56.7	1.1	14.7	14.6	9.9	4.8	0.2	2.8	8.7
209	100.0	31.0	1.6	67.1	18.0	8.0	8.6	2.3	19.4	2.0	2.0	8.7

SEE FOOTNOTES AT END OF TABLE

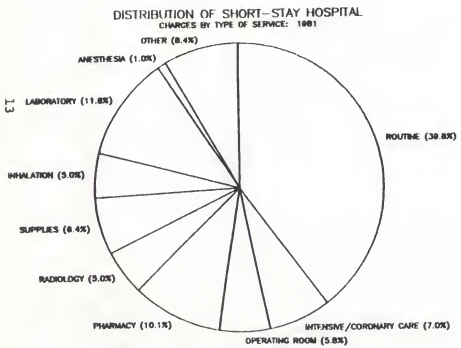
TABLE 2 (CONTINUED)

MEDICARE: PERCENTAGE DISTRIBUTION OF CHARGES INCURRED FOR BENEFICIARIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS RELATED GROUPS (DRG'S) AND TYPE OF SERVICE, CALENDAR YEARS 1981 AND 1984

	CALENDAR YEAR 1984											
		ACCOMMODATION SERVICES			ANCILLARY SERVICES							
DRG NUMBER	ALL SERVICES 1/	ROUTINE CARE	INTENSIVE/ CORONARY CARE	TOTAL	OPERATING ROOM	PHARMACY	LABORATORY	RADIOLOGY	SUPPLIES	ANESTHESIA	INHALATION THERAPY	OTHER
210	100.0	37.7	2.8	58.8	11.4	9.4	8.5	4.7	10.7	2.0	3.3	8.8
236	100.0	54.8	2.5	41.0	1.4	7.4	8.0	5.1	5.7	0.3	3.3	9.8
239	100.0	53.1	1.0	45.4	0.5	10.0	9.1	9.0	4.5	0.1	2.8	9.3
243	100.0	53.8	1.0	44.7	0.6	6.7	8.0	9.6	4.2	0.1	1.4	14.1
244	100.0	53.4	1.0	44.8	1.4	6.8	10.4	7.7	4.8	0.2	1.5	12.1
253	100.0	54.4	2.4	42.4	2.0	6.2	8.5	7.0	5.3	0.5	2.6	10.3
277	100.0	48.5	1.1	50.1	0.6	20.1	11.0	3.4	6.4	0.1	1.6	6.9
294	100.0	49.3	3.6	46.4	0.4	10.0	17.0	4.5	4.4	0.1	2.4	7.6
296	100.0	44.8	3.3	51.4	0.5	12.8	14.8	4.7	6.5	0.1	3.9	8.0
310	100.0	36.3	1.5	62.0	16.8	9.9	10.9	5.4	7.9	3.4	1.5	6.2
316	100.0	32.4	7.9	58.6	1.0	12.2	16.8	4.1	6.8	0.3	4.9	12.5
320	100.0	43.1	1.6	54.7	1.4	18.8	13.8	4.5	6.6	0.2	2.8	6.5
331	100.0	41.3	3.8	54.3	3.9	10.6	14.6	6.9	6.3	0.7	2.6	8.7
336	100.0	37.5	1.7	60.6	16.5	10.4	10.8	3.8	9.1	3.2	1.6	5.3
395	100.0	43.3	1.9	53.2	0.8	9.2	19.0	6.0	4.5	0.1	2.8	10.8
403	100.0	37.5	2.7	59.1	1.4	17.5	16.8	4.9	5.2	0.2	3.1	9.9
410	100.0	36.2	0.9	62.3	1.0	36.8	9.3	4.2	5.1	0.1	0.8	5.2
416	100.0	32.2	5.9	61.4	0.4	22.5	14.6	3.6	7.3	0.1	5.7	7.3
429	100.0	63.2	2.1	34.2	0.2	5.8	9.4	4.8	3.4	0.1	1.5	9.0
430	100.0	75.8	2.1	21.4	0.3	4.6	5.5	2.1	1.1	0.2	0.7	6.9
449	100.0	38.4	10.3	50.8	0.3	8.7	15.9	4.7	5.3	0.1	5.6	10.3
468	100.0	29.8	8.0	60.8	7.3	12.7	11.9	4.5	8.6	1.2	5.7	8.7
ALL OTHER DRG'S	100.0	34.0	5.9	59.1	9.0	11.9	11.0	4.8	8.1	1.7	4.0	8.7

1/ DETAIL MAY NOT ADD TO TOTAL BECAUSE OF ROUNDING.
2/ IN 1981, DRG 0121 WAS COMBINED WITH DRG 0122.
3/ LESS THAN 0.05 PERCENT.

FIGURE 1


DISTRIBUTION OF SHORT-STAY HOSPITAL
CHARGES BY TYPE OF SERVICE: 1981
OTHER (8.4%)
ANESTHESIA (1.0%)
LABORATORY (11.8%)
ROUTINE (30.8%)
INHALATION (5.0%)
SUPPLIES (8.4%)
RADIOLOGY (5.0%)
PHARMACY (10.1%)
INTENSIVE/CORONARY CARE (7.0%)
OPERATING ROOM (5.8%)

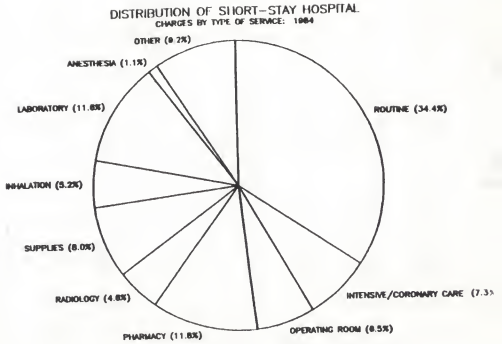

DISTRIBUTION OF SHORT-STAY HOSPITAL
CHARGES BY TYPE OF SERVICE: 1984
OTHER (8.2%)
ANESTHESIA (1.1%)
LABORATORY (11.8%)
ROUTINE (34.4%)
INHALATION (5.2%)
SUPPLIES (8.0%)
RADIOLOGY (4.8%)
PHARMACY (11.8%)
INTENSIVE/CORONARY CARE (7.3%)
OPERATING ROOM (8.5%)

TABLE 3

MEDICARE: NUMBER OF DISCHARGES, MEAN LENGTH OF STAY, STANDARD DEVIATION (SD) OF MEAN LENGTH OF STAY, COFFICIENT OF VARIATION (CV), AND SELECTED LENGTH OF STAY PERCENTILES FOR BENEFICIARIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS RELATED GROUPS (DRG'S), CALENDAR YEARS 1981 AND 1984

	CALENDAR YEAR 1981								CALENDAR YEAR 1984							
	LENGTH OF STAY			SELECTED PERCENTILES					LENGTH OF STAY			SELECTED PERCENTILES				
DRG NUMBER	MEAN	SD	CV	10TH	25TH	50TH	75TH	90TH	MEAN	SD	CV	10TH	25TH	50TH	75TH	90TH
TOTAL, ALL DRG'S	10.3	11.7	1.14	2.1	3.8	7.2	12.8	21.0	8.8	10.7	1.22	1.9	3.3	6.2	10.8	17.6
LEADING DRG'S	10.3	11.4	1.11	2.3	4.0	7.4	12.9	20.8	8.7	10.2	1.17	1.9	3.4	6.3	10.7	17.1
005	12.3	11.2	0.91	4.6	6.3	9.4	14.5	22.2	9.4	8.2	0.87	3.8	5.0	7.2	11.2	17.0
012	14.1	17.2	1.22	3.1	5.3	9.4	16.6	28.8	12.9	16.3	1.26	2.8	4.7	8.2	15.0	28.0
014	15.4	18.2	1.18	2.6	5.6	10.6	19.2	31.9	12.4	16.6	1.34	2.6	5.0	8.8	14.7	24.4
015	7.7	8.6	1.12	2.0	3.3	5.7	9.3	14.6	6.0	6.9	1.15	1.8	2.8	4.6	7.3	11.0
024	8.1	10.6	1.31	2.0	3.4	5.7	9.5	15.6	6.9	9.0	1.30	1.8	3.0	4.9	8.1	13.0
039	3.2	2.4	0.75	1.7	2.1	2.8	3.6	4.9	2.2	1.7	0.77	1.3	1.6	2.0	2.4	3.2
065	5.8	4.8	0.83	1.8	2.9	4.7	7.4	11.0	4.7	4.6	0.98	1.6	2.4	3.8	5.8	8.4
079	16.2	16.0	0.99	3.8	7.0	12.1	19.9	32.1	12.7	11.9	0.94	3.4	6.2	10.0	15.7	23.9
082	11.7	12.2	1.04	1.8	3.8	8.2	15.4	25.5	9.7	9.7	1.00	1.8	3.6	7.1	12.3	20.4
087	11.6	13.2	1.14	1.9	4.6	8.4	14.1	23.2	9.9	11.4	1.15	2.0	4.2	7.4	12.0	19.1
088	10.1	10.1	1.00	2.9	4.7	7.6	12.2	19.0	8.6	10.9	1.27	2.7	4.2	6.6	10.1	15.7
089	11.3	10.5	0.93	3.4	5.7	8.9	13.8	21.2	9.4	8.9	0.95	3.1	5.0	7.6	11.3	16.9
096	8.6	7.2	0.84	3.0	4.6	7.0	10.4	15.5	7.2	5.6	0.78	2.8	4.0	6.0	8.8	12.7
099	7.9	8.2	1.04	1.8	3.2	5.6	9.8	16.0	6.3	7.1	1.13	1.6	2.7	4.5	7.6	12.0
107	16.3	10.4	0.64	8.8	10.6	13.8	18.5	26.4	14.4	9.8	0.68	7.8	9.3	11.8	16.2	23.5
110	18.4	14.8	0.80	7.6	10.6	14.6	21.4	33.0	16.2	12.5	0.77	6.7	9.4	12.9	18.9	28.6
116	11.5	8.7	0.76	3.8	5.9	9.3	14.5	21.6	9.2	10.2	1.11	3.2	4.8	7.5	11.3	16.6
121 1/	---	---	---	---	---	---	---	---	12.1	7.4	0.61	4.7	7.8	10.9	14.8	20.2
122	12.8	8.4	0.66	3.7	7.6	11.8	16.0	21.6	10.3	6.7	0.65	3.5	5.7	8.6	12.7	16.4
123	6.2	9.9	1.60	0.5	1.2	2.5	7.5	16.0	5.6	8.7	1.55	0.5	1.3	2.6	6.9	13.9
125	8.2	9.5	1.16	1.5	2.2	4.3	11.9	19.5	3.7	3.8	1.03	1.4	1.8	2.3	4.3	8.0
127	10.7	10.7	1.00	2.9	4.9	8.1	13.1	20.5	8.7	8.5	0.98	2.6	4.2	6.8	10.5	16.3
128	11.4	7.9	0.69	4.7	7.0	9.8	13.7	19.0	9.8	5.8	0.59	4.3	6.5	8.7	11.7	15.8
130	10.6	12.1	1.14	2.0	3.9	7.7	13.3	21.4	8.1	10.7	1.32	1.6	2.9	5.1	10.1	15.5
132	9.2	8.9	0.97	2.3	4.0	7.0	11.5	17.9	7.1	11.4	1.60	2.0	3.2	5.2	8.3	12.8
134	8.2	8.2	1.00	2.3	3.7	6.2	10.0	16.7	6.7	7.3	1.09	2.0	3.2	5.1	8.0	12.4
138	7.8	7.6	0.97	1.9	3.4	5.9	9.6	15.2	6.3	6.4	1.02	1.8	3.0	4.9	7.8	11.9
140	7.1	5.9	0.83	2.2	3.5	5.6	8.9	13.4	5.6	4.5	0.80	1.9	3.0	4.6	6.9	10.0
141	6.8	6.6	0.97	1.9	3.1	5.2	8.4	12.9	5.0	7.7	1.53	1.7	2.8	4.4	6.8	10.1
143	5.9	5.3	0.90	1.7	2.7	4.4	7.1	11.7	4.4	4.2	0.96	1.9	2.2	3.4	5.3	8.1
144	9.8	8.8	0.91	2.2	4.1	7.4	12.5	19.6	8.3	7.0	0.84	2.1	3.7	6.6	10.6	16.1
148	20.2	15.0	0.74	9.3	12.2	16.6	23.5	34.6	17.6	12.3	0.70	8.5	10.7	14.5	20.6	29.7
154	18.8	14.8	0.79	6.4	9.8	15.1	23.4	35.2	15.4	12.4	0.81	4.5	7.7	12.2	19.1	29.6
157	8.2	7.6	0.93	2.3	3.8	6.0	10.0	15.6	6.4	7.5	1.17	1.7	2.9	4.8	7.9	12.4
161	6.3	5.4	0.78	3.0	4.0	5.6	8.0	11.9	5.3	5.0	0.94	2.0	3.0	4.2	6.2	9.2
172	13.0	13.3	1.05	2.1	4.1	8.5	17.1	29.1	10.1	11.1	1.10	1.8	3.6	6.8	12.7	21.5
174	9.0	8.8	0.98	2.6	4.4	7.0	11.0	16.9	7.5	8.9	1.19	2.3	3.8	5.8	8.8	13.4
180	9.1	13.1	1.44	1.9	3.6	6.5	10.9	18.1	7.5	10.4	1.39	1.9	3.4	5.5	8.9	14.0
182	7.3	7.2	0.99	2.1	3.4	5.5	8.8	13.8	6.1	6.5	1.07	1.9	3.0	4.7	7.4	11.2
183	6.4	6.0	0.94	1.9	3.0	4.9	7.8	12.2	5.0	4.7	0.94	1.6	2.5	4.0	6.1	9.0
188	7.8	9.6	1.23	1.6	2.8	5.3	9.4	15.9	6.3	9.4	1.49	1.5	2.3	4.3	7.7	12.6
197	14.0	8.8	0.63	6.8	8.6	11.8	16.8	23.3	11.7	7.7	0.66	5.7	7.3	9.7	13.8	19.4
207	9.0	8.6	0.96	2.5	4.1	6.9	10.9	17.2	6.9	7.5	1.09	2.0	3.3	5.4	8.5	12.8
209	19.3	11.6	0.60	10.5	13.3	16.8	22.0	29.7	15.6	9.8	0.63	8.7	10.8	13.8	17.8	23.5
210	21.2	15.7	0.74	9.7	13.2	17.8	24.3	35.9	16.7	13.1	0.81	7.8	10.5	14.0	18.7	26.9
236	17.0	16.0	0.94	3.3	7.0	12.8	21.0	32.7	12.6	14.3	1.13	2.4	5.3	9.4	15.1	23.6
239	13.4	14.2	1.06	2.8	5.2	9.6	16.8	27.4	10.4	9.5	0.91	2.9	4.9	8.0	13.0	20.1

SEE FOOTNOTE AT END OF TABLE

TABLE 3 (CONTINUED)

MEDICARE: NUMBER OF DISCHARGES, MEAN LENGTH OF STAY, STANDARD DEVIATION (SD) OF MEAN LENGTH OF STAY, COFFICIENT OF VARIATION (CV), AND SELECTED LENGTH OF STAY PERCENTILES FOR BENEFICIARIES DISCHARGED FROM SHORT-STAY HOSPITALS, BY DIAGNOSIS RELATED GROUPS (DRG'S), CALENDAR YEARS 1981 AND 1984

	CALENDAR YEAR 1981								CALENDAR YEAR 1984							
	LENGTH OF STAY			SELECTED PERCENTILES					LENGTH OF STAY			SELECTED PERCENTILES				
DRG NUMBER	MEAN	SD	CV	10TH	25TH	50TH	75TH	90TH	MEAN	SD	CV	10TH	25TH	50TH	75TH	90TH
243	9.8	8.3	0.85	2.8	4.8	8.0	12.5	18.4	8.0	7.2	0.90	2.3	3.9	6.5	9.9	14.7
244	10.1	10.8	1.07	2.9	4.6	7.7	12.4	19.0	7.9	10.6	1.34	2.3	3.7	6.1	8.5	14.3
263	9.9	11.4	1.15	2.0	3.7	7.0	12.2	20.0	7.6	8.7	1.14	1.6	3.0	5.4	9.3	15.2
277	11.0	10.8	0.98	3.4	5.3	8.3	13.3	20.6	9.1	9.3	1.02	3.2	4.7	7.1	10.7	16.0
294	10.1	10.2	1.01	3.1	5.0	7.9	12.2	18.4	8.4	8.9	1.06	2.9	4.4	6.8	10.0	14.7
296	10.5	12.6	1.20	2.5	4.3	7.4	12.6	20.5	8.3	11.2	1.35	2.2	3.6	6.0	9.5	15.4
310	6.9	7.5	1.09	1.9	2.9	4.9	8.2	13.6	5.6	5.5	0.98	1.7	2.6	4.2	6.8	10.8
316	11.0	12.8	1.16	1.5	3.3	7.2	13.8	24.4	9.7	14.8	1.53	1.5	3.5	6.9	12.1	20.0
320	9.4	9.8	1.04	2.7	4.5	7.2	11.4	17.4	8.1	8.5	1.05	2.8	4.3	6.5	9.7	14.4
331	9.3	9.8	1.05	1.9	3.5	6.5	11.5	19.2	7.3	8.1	1.11	1.6	2.9	5.2	9.0	14.7
336	9.8	6.9	0.70	4.7	5.9	8.0	11.3	16.8	7.9	5.6	0.71	3.9	5.0	6.5	9.0	13.1
395	8.8	10.0	1.14	1.8	3.5	6.6	11.0	17.4	6.7	9.4	1.40	1.7	2.6	4.9	8.2	13.0
403	11.8	13.5	1.14	1.6	3.6	7.6	15.2	26.8	11.0	11.9	1.08	1.7	3.6	7.2	14.0	24.7
410	4.2	6.3	1.50	0.7	1.7	2.4	4.8	7.4	3.3	3.9	1.18	0.7	1.7	2.3	4.4	6.1
416	14.2	15.6	1.10	2.1	5.6	10.6	17.4	28.5	11.3	11.4	1.01	2.4	5.4	9.0	13.9	21.0
429	13.7	21.3	1.55	2.8	5.1	8.9	15.7	26.7	11.6	21.8	1.88	2.7	4.4	7.6	13.4	22.0
430	16.5	16.2	0.98	2.9	5.9	12.0	21.7	34.9	16.0	14.5	0.91	3.1	6.2	12.2	21.3	33.4
449	8.0	9.6	1.20	1.8	3.3	5.9	9.7	15.3	6.3	7.2	1.14	1.6	2.8	4.7	7.7	12.2
468	17.0	18.1	1.06	2.8	6.2	12.5	21.7	35.3	16.6	18.6	1.12	3.2	6.5	12.0	20.5	33.3
ALL OTHER DRG'S	10.2	12.1	1.19	2.0	3.8	6.9	12.5	21.3	9.1	11.6	1.27	1.8	3.1	6.0	11.0	18.9

1/ IN 1981 DRG 121 WAS COMBINED WITH DRG 122

ATTACHMENT 1

DESCRIPTION OF THE 66 LEADING DIAGNOSIS RELATED GROUPS (DRG'S): 1984

MAJOR DIAGNOSTIC CATEGORY		DIAGNOSIS RELATED GROUPS	
MDC NUMBER	DESCRIPTION	DRG NUMBER	DESCRIPTION
01	DISEASES AND DISORDERS OF THE NERVOUS SYSTEM	005	EXTRACRANIAL VASCULAR PROCEDURES
		012	DEGENERATIVE NERVOUS SYSTEM DISORDERS
		014	SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TRANSIENT ISCHEMIC ATTACK
		015	TRANSIENT ISCHEMIC ATTACKS
		024	SEIZURE AND HEADACHE, AGE GREATER THAN 69 AND/OR C.C.
02	DISEASES AND DISORDERS OF THE EYE	039	LENS PROCEDURES
03	DISEASES AND DISORDERS OF THE EAR, NOSE, AND THROAT	065	DYSEQUILIBRIUM
04	DISEASES AND DISORDERS OF THE RESPIRATORY SYSTEM	079	RESPIRATORY INFECTIONS AND INFLAMMATIONS, AGE GREATER THAN 69 AND/OR C.C.
		082	RESPIRATORY NEOPLASMS
		087	PULMONARY EDEMA AND RESPIRATORY FAILURE
		088	CHRONIC OBSTRUCTIVE PULMONARY DISEASE
		089	SIMPLE PNEUMONIA AND PLEURISY, AGE GREATER THAN 69 AND/OR C.C.
		096	BRONCHITIS AND ASTHMA, AGE GREATER THAN 69 AND/OR C.C.
		099	RESPIRATORY SIGNS AND SYMPTOMS, AGE GREATER THAN 69 AND/OR C.C.
05	DISEASES OF DISORDERS OF THE CIRCULATORY SYSTEM	107	•CORONARY BYPASS WITHOUT CARDIAC CATHETER
		110	MAJOR RECONSTRUCTIVE VASCULAR PROCEDURES, AGE GREATER THAN 69 AND/OR C.C.
		116	PERMANENT CARDIAC PACEMAKER IMPLANTATION WITHOUT ACUTE MYOCARDIAL INFARCTION OR CONGESTIVE HEART FAILURE
		121	•CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION AND CARDIOVASCULAR COMPLICATIONS, DISCHARGED ALIVE
		122	•CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION, WITHOUT CARDIOVASCULAR COMPLICATIONS, DISCHARGED ALIVE
		123	CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION, EXPIRED
		125	CIRCULATORY DISORDERS, EXCLUDING ACUTE MYOCARDIAL INFARCTION, WITH CARDIAC CATHETER, WITHOUT COMPLEX DIAGNOSIS
		127	HEART FAILURE AND SHOCK
		128	DEEP VEIN THROMBOPHLEBITIS
		130	PERIPHERAL VASCULAR DISORDERS, AGE GREATER THAN 69 AND/OR C.C.
		132	ATHEROSCLEROSIS, AGE GREATER THAN 69 AND/OR C.C.
		134	HYPERTENSION
		138	CARDIAC ARRHYTHMIA AND CONDUCTION DISORDERS, AGE GREATER THAN 69 AND/OR C.C.
		140	ANGINA PECTORIS
		141	SYNCOPE AND COLLAPSE, AGE GREATER THAN 69 AND/OR C.C.
		143	CHEST PAIN
		144	OTHER CIRCULATORY DIAGNOSES WITH C.C.
06	DISEASES AND DISORDERS OF THE DIGESTIVE SYSTEM	148	MAJOR SMALL AND LARGE BOWEL PROCEDURES, AGE GREATER THAN 69 AND/OR C.C.
		154	STOMACH, ESOPHAGEAL, AND DUODENAL PROCEDURES, AGE GREATER THAN 69 AND/OR C.C.
		157	ANAL PROCEDURES, AGE GREATER THAN 69 AND/OR C.C.
		161	INGUINAL AND FEMORAL HERNIA PROCEDURES, AGE GREATER THAN 69 AND/OR C.C.
		172	DIGESTIVE MALIGNANCY, AGE GREATER THAN 69 AND/OR C.C.
		174	GASTROINTESTINAL HEMORRHAGE, AGE GREATER THAN 69 AND/OR C.C.
		180	GASTROINTESTINAL OBSTRUCTION, AGE GREATER THAN 69 AND/OR C.C.
		182	ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISORDERS, AGE GREATER THAN 69 AND/OR C.C.
		183	ESOPHAGITIS, GASTROENTERITIS, AND MISCELLANEOUS DIGESTIVE DISORDERS, AGE 18-69 WITHOUT C.C.
		188	OTHER DIGESTIVE SYSTEM DIAGNOSES, AGE GREATER THAN 69 AND/OR C.C.

SEE FOOTNOTE AT END OF TABLE

ATTACHMENT 1 (CONTINUED)

DESCRIPTION OF THE 66 LEADING DIAGNOSIS RELATED GROUPS (DRG'S): 1984

MAJOR DIAGNOSTIC CATEGORY		DIAGNOSIS RELATED GROUPS	
MDC NUMBER	DESCRIPTION	DRG NUMBER	DESCRIPTION
07	DISEASES AND DISORDERS OF THE HEPATOBILIARY SYSTEM AND PANCREAS	197	*TOTAL CHOLECYSTECTOMY WITHOUT COMMON BILE DUCT EXPLORATION, AGE GREATER THAN 69 AND/OR C.C.
		207	DISORDERS OF THE BILIARY TRACT, AGE GREATER THAN 69 AND/OR C.C.
08	DISEASES AND DISORDERS OF THE MUSCULOSKELETAL SYSTEM AND CONNECTICE TISSUE	209	MAJOR JOINT PROCEDURES
		210	HIP AND FEMUR PROCEDURES EXCEPT MAJOR JOINT, AGE GREATER THAN 69 AND/OR C.C.
		236	FRACTURES OF HIP AND PELVIS
		239	PATHOLOGICAL FRACTURES AND MUSCULOSKELETAL AND CONNECTIVE TISSUE MALIGNANCY
		243	MEDICAL BACK PROBLEMS
		244	BONE DISEASE AND SEPTIC ARTHROPATHY, AGE GREATER THAN 69 AND/OR C.C.
		253	FRACTURES, SPRAINS, STRAINS AND DISLOCATION OF UPPER ARM, AND LOWER LEG EXCEPT FOOT, AGE GREATER THAN 69 AND/ OR C.C.
09	DISEASES AND DISORDERS OF THE SKIN, SUBCUTANEOUS TISSUE AND BREAST	277	CELLULITIS, AGE GREATER THAN 69 AND/OR C.C.
10	ENDOCRINE, NUTRITIONAL, AND METABOLIC DISEASES AND DISORDERS	294	DIABETES, AGE 36 OR GREATER
		296	NUTRITIONAL AND MISCELLANEOUS METABOLIC DISORDERS, AGE GREATER THAN 69 AND/OR C.C.
11	DISEASES AND DISORDERS OF THE KIDNEY AND URINARY TRACT	310	TRANSURETHRAL PROCEDURES, AGE GREATER THAN 69 AND/OR C.C.
		316	RENAL FAILURE WITHOUT DIALYSIS
		320	KIDNEY AND URINARY TRACT INFECTIONS, AGE GREATER THAN 69 AND/OR C.C.
		331	OTHER KIDNEY AND URINARY TRACT DIAGNOSES, AGE GREATER THAN 69 AND/OR C.C.
12	DISEASES AND DISORDERS OF THE MALE REPRODUCTIVE SYSTEM	336	TRANSURETHRAL PROSTATECTOMY, AGE GREATER THAN 69 AND/OR C.C.
16	DISEASES AND DISORDERS OF THE BLOOD AND BLOOD-FORMING ORGANS AND IMMUNOLOGICAL DISORDERS	395	RED BLOOD CELL DISORDERS, AGE GREATER THAN 17
17	MYELOPROLIFERATIVE DISEASES AND DISORDERS AND POORLY DIFFERENTIATED NEOPLASMS	403	LYMPHOMA OR LEUKEMIA, AGE GREATER THAN 69 AND/OR C.C.
		410	CHEMOTHERAPY
18	INFECTIOUS AND PARASITIC DISEASES (SYSTEMIC OR UNSPECIFIED SITES)	416	SEPTICEMIA, AGE GREATER THAN 17
19	MENTAL DISEASES AND DISORDERS	429	ORGANIC DISTURBANCES AND MENTAL RETARDATION
		430	PSYCHOSES
21	INJURY, POISONING, AND TOXIC EFFECTS OF DRUGS	449	TOXIC EFFECTS OF DRUGS, AGE GREATER THAN 69 AND/OR C.C.
23	FACTORS INFLUENCING HEALTH STATUS AND CONTACTS WITH HEALTH SERVICES	468	UNRELATED OPERATING ROOM PROCEDURE

DRG CATEGORIES COMBINED (IN PAIRS) IN THE CALCULATION OF THE CASE MIX INDEX.
CC = COMORBIDITY AND/OR COMPLICATION.

Definition of Terms

Diagnosis-related groups (DRG's): The DRG patient classification system used by Medicare places patients into 470 mutually exclusive and exhaustive patient groups based on information from the discharge record such as the principal diagnosis, surgical procedure, age, sex, discharge status, and the presence or absence of an additional diagnosis. The 470 Medicare DRG's represent patient categories that are reasonably similar in resource consumption as measured by length of stay.

Hospital charges: Hospital charges for accommodation (routine room and board and intensive/coronary care) and ancillary services as recorded on the billing form.

Discharge: The formal release of an inpatient from a hospital. All discharges including those persons who died during their hospitalization are included.

Routine room and board: Routine inpatient hospital services provided in semi-private accommodations containing two to four beds.

Intensive/coronary care: Special inpatient care units within a hospital for the treatment of critically ill patients who are under constant surveillance by trained personnel with emergency techniques and equipment immediately available.

Operating room: Surgery and related services provided to inpatients in the hospital operating room by physicians and specially trained nursing personnel who assist physicians in the performance of surgical and related procedures during and immediately following surgery.

Pharmacy: Drugs and biologicals for use in the hospital that are ordinarily furnished by the hospital for the care and treatment of patients.

Laboratory: Services in which diagnostic and routine clinical and pathological laboratory tests are performed for the diagnosis and treatment of hospital inpatients.

Radiology: Diagnostic and therapeutic radiology services required for the examination and treatment of hospital inpatients under the direction of a qualified radiologist.

Supplies: Supplies that are ordinarily furnished by the hospital for the care and treatment of the patient solely during his inpatient stay in the hospital.

Anesthesia: Services rendered in administering anesthetics to surgical patients in the hospital, by or under the direction of, either a physician trained in anesthesia or the operating surgeon.

Inhalation therapy: The administration by specially trained personnel of oxygen and certain potent drugs through inhalation of positive pressure and other forms of rehabilitative therapy as prescribed by physicians.

Percentiles: Percentiles are values which divide a distribution into 100 equal parts. For this report, the 25th length-of-stay percentile (P_{25}) represents that value for which 25 percent of the cases in the population have a length of stay less than P_{25}.

Standard deviation: The standard deviation (SD) represents the degree to which numerical data tend to spread about an average. It is defined as the square root of the arithmetic mean of the sum of the squares of the deviations of all values of the variate about the population arithmetic mean. For this report, the SD of the average length of stay represents a value which approximates the average length of stay.

Coefficient of variation: The coefficient of variation (CV) is a measure which expresses the magnitude of the variation relative to the size of the quantity being measured. For this report the CV gives the standard deviation as a proportion of the average length of stay. The larger the value for the CV, the greater the dispersion of the data around the average length of stay.

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Sources and Limitations of Data

The data shown in this report were derived from the HCFA short-stay hospital inpatient stay record file. This file is generated by linking information from three HCFA master program files -- the utilization bill file, the health insurance entitlement file, and the provider of services file. The statistical stay record, thereby, provides information on the patient, the hospital, and the hospitalization.

Three types of limitations should be considered when analyzing the data shown in the tables; sampling variability, administrative time lag, and changes in the medical reporting and coding system. These are described below.

First, the data presented are based on short-stay hospital stay records (which includes both PPS and non-PPS patient bills) contained in the 20-percent inpatient stay record file. Therefore, the data are subject to sampling variability. Sample counts were multiplied by a factor of 5 to estimate population totals.

The second data limitation is the incompleteness of the 1981 and the 1984 stay record files used to produce the data in this report. This is a result of the administrative time lag between the time when a bill (HCFA-1453) is submitted for payment and when it is posted to central records. The processing cutoff date for the data in this report was July 1982 and July 1985, respectively. Therefore, discharges for 1981 and 1984 recorded after these dates were not included. A complete count of Medicare discharges from short-stay hospitals in 1981 will probably total about 10.7 million, or about 5 percent more than the total figure used in this study (10.2 million discharges). These 10.2 million discharges were rendered services amounting to an estimated $36.1 billion in hospital charges. Similarly, for 1984, a complete count of Medicare discharges will probably total about 11.2 million discharges and $53.7 billion in hospital charges. The shortfall described above, however, should not affect the validity of the estimates for percentages and average charges per discharge.

The most important limitation of the data, as related to the impact of PPS, is that changes in use by DRG may reflect, to some extent, increased accuracy in the reporting of medical codes, more adherence to ICD-9-CM coding guidelines, changes in the information contained in the billing sytem, and changes in incentives to report, rather than real changes in the diagnoses or procedures (which determine the DRG). As a result, extreme caution should be exercised in analyzing the program data shown in this report.

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